

SUMMARY

The Impact of Planning, Organizing, Actuating, Controlling Mechanism on The Improvement of Public Health Center Performance in Banjarnegara District

Public Health Center (PHC) must carry out effective and efficient management when doing their duties and functions. Quality of PHC management is a series of continuous routine activities, carried out in the implementation of various quality health efforts. PHC management must always be monitored and controlled continuously, so the performance of PHC can be improved. While the performance assessment of PHC was carried out based on the achievement of the implementation of health services, the PHC management carry out independently then the result are verified by the district health office. Results from verification of PHC performance appraisal are used to determine the targets to be achieved.

Health organizational performance correlates with management practices, leadership, manager characteristics and cultural traits that relate to managerial values and approaches. Management can improve performance on health systems and organizations. The influence of management on the performance of health services, including the influence of planning, organizing, coordinating, commanding and controlling on organizational performance.

PHC in Banjarnegara Regency from 2014 to 2016 have had a decrease in the number of PHC which increase in PHC performance. In 2016 it was only 20% of 35 PHC which increase in PHC performance or decreased by 14.3% from the previous year. This will certainly affect the development of the health sector in Banjarnegara Regency, because the decline in the value from the performance of PHC shows that the health services provided by PHC was not effective.

This study aims to examine the influence of the mechanism of planning, organizing, actuating, controlling on improving the performance of Public Health Center (PHC) in Banjarnegara District. A total of 19 PHC were included in the study with cross sectional design. Planning, organizing, actuating, controlling was identified by collecting primary data through interviews with questionnaires. On the other hand the data on the characteristics of the region, the background of PHC Leader, accreditation status, the performance of PHC were obtained through secondary data from the Banjarnegara District Health Office. The influence test was carried out using multiple linear regression and ordinal regression with α (0.05).

Results from this study showed that the majority of PHC in Banjarnegara Regency were in rural areas (79.0%), have a fixed performance (63.2%), on intermediate accredited (42.1%), the majority background of PHC Leader was SKM (47.4%). The majority of PHC in Banjarnegara District did not fulfill the planning mechanism (68.4%), actuating (63.2%) and controlling (100%). The organizing mechanism in most PHC in Banjarnegara District has been fulfilled (52.6%). The results showed the characteristics of urban areas affect the planning mechanism (p value = 0.040), while planning mechanism (p value = 0.022) and

performance improvement (p value = 0.001) affect the accreditation status. Furthermore, the characteristics of the region (p value = 0.001) planning mechanism (p value = 0.014), organizing (p value = 0.048), actuating (p value = 0.019), controlling (p value = 0.016) affect the performance improvement of PHC in Banjarnegara District.

To sum up, the regional characteristics affects the planning mechanism while, planning mechanism and the performance improvement of PHC affect the accreditation status. In addition, the mechanism of planning, organizing, actuating and controlling affects the performance improvement of PHC in Banjarnegara District. Hence, this study suggest that guidelines for PHC management, workload assessments as well as job designs are needed for the Head of the PHC and the Head of Administration.

RINGKASAN

Pengaruh Mekanisme *Planning, Organizing, Actuating, Controlling* terhadap Peningkatan Kinerja Puskesmas di Kabupaten Banjarnegara

Puskesmas harus melaksanakan manajemen yang efektif dan efisien dalam menjalankan tugas dan fungsinya. Manajemen Puskesmas yang berkualitas merupakan rangkaian kegiatan rutin berkesinambungan, yang dilaksanakan dalam penyelenggaraan berbagai upaya kesehatan secara bermutu. Manajemen Puskesmas harus selalu dipantau secara berkala dan teratur, serta diawasi dan dikendalikan sepanjang waktu, agar kinerja Puskesmas dapat terus diperbaiki dan ditingkatkan. Penilaian kinerja Puskesmas dilakukan berdasarkan pencapaian pelaksanaan pelayanan kesehatan dan manajemen Puskesmas yang dilaksanakan secara mandiri dan kemudian hasil penilaiannya diverifikasi oleh dinas kesehatan kabupaten/kota. Hasil verifikasi penilaian kinerja Puskesmas selanjutnya digunakan untuk menentukan sasaran yang akan dicapai sebagai hasil kerja atau prestasi Puskesmas.

Kinerja organisasi kesehatan mempunyai korelasi dengan praktek manajemen, kepemimpinan, karakteristik manajer dan sifat budaya yang menghubungkan dengan nilai dan pendekatan manajerial. Manajemen dapat meningkatkan kinerja pada sistem dan organisasi kesehatan. Pengaruh manajemen pada kinerja pelayanan kesehatan, antara lain seperti pengaruh *planning, organizing, coordinating, commanding dan controlling* terhadap kinerja organisasi.

Puskesmas di Kabupaten Banjarnegara dari tahun 2014 sampai dengan 2016 mengalami penurunan jumlah Puskesmas yang mengalami peningkatan kinerja Puskesmas. Terhitung hanya 20% dari 35 Puskesmas yang mengalami kenaikan nilai kinerja Puskesmas pada tahun 2016 atau mengalami penurunan 14,3% dari tahun sebelumnya. Hal ini tentunya akan mempengaruhi pembangunan bidang kesehatan di Kabupaten Banjarnegara, karena menurunnya nilai kinerja Puskesmas menunjukkan bahwa pelayanan kesehatan yang diberikan Puskesmas yang diberikan belum efektif.

Penelitian ini bertujuan untuk mengkaji pengaruh mekanisme *planning, organizing, actuating, controlling* terhadap peningkatan kinerja Puskesmas di Kabupaten Banjarnegara. Sebanyak 19 Puskesmas dilibatkan dalam penelitian rancang bangun *cross sectional* ini. Mekanisme *planning, organizing, actuating, controlling* diidentifikasi dengan pengumpulan data primer melalui wawancara dengan kuesioner. Sedangkan data karakteristik wilayah, latar belakang Kepala Puskesmas, status akreditasi, kinerja puskesmas merujuk pada data sekunder dari Dinas Kesehatan Kabupaten Banjarnegara. Uji pengaruh antara variabel independen dan variabel dependen dilakukan menggunakan uji regresi linier ganda dan regresi ordinal dengan nilai α (0,05).

Mayoritas Puskesmas di Kabupaten Banjarnegara berada pada wilayah pedesaan (79,0%), mempunyai kinerja tetap 63,2%), terakreditasi madya (42,1%), dengan latar belakang Kepala Puskesmas adalah SKM (47,4%). Mayoritas

Puskesmas di Kabupaten Banjarnegara tidak memenuhi mekanisme *planning* (68,4%), *actuating* (63,2%) dan *controlling* (100%). Mekanisme *organizing* pada sebagian besar Puskesmas di Kabupaten Banjarnegara telah terpenuhi (52,6%). Hasil penelitian menunjukkan karakteristik wilayah perkotaan berpengaruh terhadap mekanisme *planning* (nilai $p=0,040$), mekanisme *planning* (nilai $p=0,022$) dan peningkatan kinerja (nilai $p=0,001$) berpengaruh terhadap status akreditasi. Selanjutnya karakteristik wilayah (nilai $p=0,001$) dan mekanisme *planning* (nilai $p=0,014$), *organizing* (nilai $p=0,048$), *actuating* (nilai $p=0,019$), *controlling* (nilai $p=0,016$) berpengaruh terhadap peningkatan kinerja Puskesmas di Kabupaten Banjarnegara.

Kesimpulan yang diperoleh dari penelitian ini adalah karakteristik wilayah mempunyai pengaruh terhadap mekanisme *planning*. Mekanisme *planning* dan peningkatan kinerja Puskesmas berpengaruh terhadap status akreditasi Puskesmas. Mekanisme *planning*, *organizing*, *actuating*, *controlling* berpengaruh terhadap peningkatan kinerja Puskesmas di Kabupaten Banjarnegara. Dibutuhkan pedoman manajemen Puskesmas serta perlu dilakukan pengkajian beban kerja dan *job design* bagi Kepala Puskesmas dan Kepala Tata Usaha.

ABSTRACT

The Impact of Planning, Organizing, Actuating and Controlling Mechanism on The Improvement Of Public Health Center Performance in Banjarnegara District

The purpose of this study was to examine the effect of the mechanism of planning, organizing, actuating and controlling on the performance improvement of Public Health Center (PHC) in Banjarnegara Regency. A total of 19 PHC were included in the study with cross sectional design. The mechanism of planning, organizing, actuating and controlling is identified by collecting primary data through interview with questionnaires. On the other hand, the data of the region characteristics, the background of the Head of the PHC, accreditation status and performance of the PHC was obtained by the Banjarnegara District Health Office. The impact test between the independent variable and the dependent variable was carried out using multiple linear regression and ordinal regression with α (0.05). The results showed that the characteristics of urban areas influence the planning mechanism (p value = 0.040), while planning mechanism (p value = 0.022) and performance improvement (p value = 0.001) affect the accreditation status. Furthermore, the characteristics of the region (p value = 0.001) and planning mechanism (p value = 0.014), organizing (p value = 0.048), actuating (p value = 0.019) and controlling (p value = 0.016) affect the performance of PHC in Banjarnegara District. To sum up, the regional characteristics affects the planning mechanism while, planning mechanism and the performance improvement of PHC affect the accreditation status. In addition, the mechanism of planning, organizing, actuating and controlling affects the performance improvement of PHC in Banjarnegara District. Hence, this study suggest that guidelines for PHC management, workload assessments as well as job designs are needed for the Head of the PHC and the Head of Administration.

Keywords: planning, organizing, actuating, controlling, public health center performance

ABSTRAK

Pengaruh Mekanisme *Planning, Organizing, Actuating, Controlling* terhadap Peningkatan Kinerja Puskesmas di Kabupaten Banjarnegara

Tujuan penelitian ini untuk mengkaji pengaruh mekanisme *planning, organizing, actuating, controlling* terhadap peningkatan kinerja Puskesmas di Kabupaten Banjarnegara. Sebanyak 19 Puskesmas dilibatkan dalam penelitian dengan rancang bangun *cross sectional*. Mekanisme *planning, organizing, actuating, controlling* diidentifikasi dengan pengumpulan data primer melalui wawancara dengan kuesioner. Sedangkan data karakteristik wilayah, latar belakang Kepala Puskesmas, status akreditasi, kinerja puskesmas merujuk pada data sekunder dari Dinas Kesehatan Kabupaten Banjarnegara. Uji pengaruh antara variabel independen dan variabel dependen dilakukan menggunakan uji regresi linier ganda dan regresi ordinal dengan nilai α (0,05). Hasil penelitian menunjukkan karakteristik wilayah perkotaan berpengaruh terhadap mekanisme *planning* (nilai $p=0,040$), mekanisme *planning* (nilai $p=0,022$) dan peningkatan kinerja (nilai $p=0,001$) berpengaruh terhadap status akreditasi. Selanjutnya karakteristik wilayah (nilai $p=0,001$) dan mekanisme *planning* (nilai $p=0,014$), *organizing* (nilai $p=0,048$), *actuating* (nilai $p=0,019$), *controlling* (nilai $p=0,016$) berpengaruh terhadap peningkatan kinerja Puskesmas di Kabupaten Banjarnegara. Kesimpulan yang diperoleh dari penelitian ini adalah karakteristik wilayah berpengaruh terhadap mekanisme *planning*, mekanisme *planning* dan peningkatan kinerja Puskesmas berpengaruh terhadap status akreditasi serta mekanisme *planning, organizing, actuating, controlling* pada Puskesmas berpengaruh terhadap peningkatan kinerja Puskesmas di Kabupaten Banjarnegara. Dibutuhkan pedoman manajemen Puskesmas serta perlu dilakukan pengkajian beban kerja dan *job design* bagi Kepala Puskesmas dan Kepala Tata Usaha.

Keywords: *planning, organizing, actuating, controlling*, kinerja Puskesmas